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FACSIMILE COVER LETTER

To: Commissioner for Patents
Firm: United States Patent & Trademark Office
Facsimile: 703-872-9314
From: Hans R. Mahr
Frommer Lawrence & Haug LLP
Date: June 1, 2004
Re: U.S. Patent Application No. 09/388,781
Attorney Docket No. 450127-02160
Number of Pages: 14
(including cover page)
cc:

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Dear Sir:

In connection with the Application referenced above, the following documents are submitted herewith:

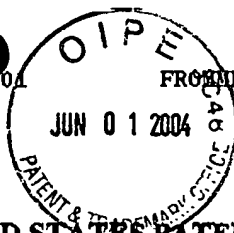
- Fee Transmittal
- USPTO Form 2038 - Credit Card Payment Form (No. 0177) in the amount of \$110.00
- Amendment

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Attorney Docket No. 450127-02160

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Masayuki CHATANI et al.

Appl. No. : 09/388,781

Filed : September 2, 1999

For : DATA TRANSMITTING AND RECEIVING SYSTEM, DATA RECEIVING APPARATUS, AND DATA TRANSMITTING APPARATUS

Art Unit : 2615

Examiner : TRAN, Thai Q.

COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
- ☐ The fee has been calculated as shown below.
- ☐ This is an application of a small entity under 37 CFR 1.9(i).

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number of claims previously paid for*	(5)	(6) Extra claims	(7)	(8) Rate	(9)	(10) Additional fee
Total Claims	15	-	20	=	0	x	\$18(\$9)	=	\$0.00
Independent Claims	4	-	4	=	0	x	\$86(\$43)	=	\$0.00
Total Fee for additional claims									\$0.00

* If the highest number of total claims previously paid for is less than 20, write "20" in this space. If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

** If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

- ☒ A fee of \$110.00 is due to cover:
- ☐ additional claims,
- ☐ multiple dependent claim(s),
- ☒ an extension of time. This response is being filed within 1 month(s) following the expiration of the term originally set therefor. This is a petition to request a 1 month extension of time.
- This fee is to be paid by:
- ☒ an enclosed USPTO Form 2038 - Credit Card Payment Form in the amount of \$110.00.
- ☐ charging \$00.00 to Deposit Account No. 50-0320.

☐ This application contains a multiple dependent claim. The required fee of \$290(\$145) ☐ has been previously paid, or ☐ is paid herewith.

☒ Please charge any additional fees incurred by this response or credit any overpayment to Deposit Account No. 50-0320.

FACSIMILE

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office (Facsimile No. 703-872-9314) on the date shown below.

Hans R. Mahr Reg. No. 46,138

Type or print name of
person signing certification

June 1, 2004

Date of Signature

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Attorneys for Applicant(s)

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